2003 NOT-FOR-PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED
Feb 13, 2003 8:00 am
Secretary of State
02-13-2003 90198 003 ****61.25

DOCUMENT # N33050

1. Entity Name
SEAGATE COVE YACHT CLUB, INC.

Principal Place of Business	Mailing Address
344 VENETIAN DRIVE DELRAY BEACH FL 33483-6840	344 VENETIAN DRIVE DELRAY BEACH FL 33483-6840

☐ CHECK HERE IF MAKING CHANGES

2. Principal Place of Business	3. Mailing Address
344 VENETIAN DRIVE	344 VENETIAN DRIVE
Suite, Apt. #, etc.: #3	Suite, Apt. #, etc.: #3
City & State: DELRAY BEACH FLORIDA	City & State: DELRAY BEACH FLORIDA
Zip: 33483-6840 Country: USA	Zip: 33483-6840 Country: USA

4. FEI Number 65-0143007 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent

LYONS, H. TERRENCE
344 VENETINA DRIVE UNIT 3
DELRAY BEACH FL 34483

7. Name and Address of New Registered Agent

Name: LYONS, H. TERRENCE
Street Address (P.O. Box Number is Not Acceptable): 344 VENETIAN DRIVE UNIT #3
City: DELRAY BEACH FL Zip Code: 33483

8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____ DATE 02/06/03
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

FILE NOW: FEE IS $61.25

9. Election Campaign Financing Trust Fund Contribution. ☐ **$5.00** May Be Added to Fees

Make Check Payable to Florida Department of State

10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10		
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	DT MILLER, MARTIN V 344 VENETIAN DRIVE, UNIT 2 DELRAY BEACH FL 34483	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	DST MILLER, MARTIN V 344 VENETIAN DRIVE UNIT 2 DELRAY BEACH FL 33483	☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D VOGT, CATHERINE P 344 VENETIAN DRIVE, UNIT 1 DELRAY BEACH FL 34483	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	DP LYONS, H TERNECE 344 VENETIAN DRIVE, UNIT 3 DELRAY BEACH FL 34483	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D MORRISSETTE, PETER 344 VENETIAN DR UNIT 5 DELRAY BEACH FL 33483	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D ROSS, DAVID 344 VENETIAN DR UNIT 4 DELRAY BEACH FL 33483	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition

CR2E037 (10/02)

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 617, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: Martin V. Miller SIGN HERE MARTIN V. MILLER 02/06/03 561-274-4394
OFFICER OR DIRECTOR OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #